

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | 64181 | 12-14-99 |
| O.I.P.E. CLASSIFIER | | 7 | 12-27-99 |
| FORMALITY REVIEW | | 71022 | 1-11-00 |
| RESPONSE FORMALITY REVIEW | | | |

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INDEX OF CLAIMS

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 (Through numeral) Canceled A
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Non-elected
 Interference
 Appeal
 Objected

| Claim | Final | Original |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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